



This is a digital copy of a book that was preserved for generations on library shelves before it was carefully scanned by Google as part of a project to make the world's books discoverable online.

It has survived long enough for the copyright to expire and the book to enter the public domain. A public domain book is one that was never subject to copyright or whose legal copyright term has expired. Whether a book is in the public domain may vary country to country. Public domain books are our gateways to the past, representing a wealth of history, culture and knowledge that's often difficult to discover.

Marks, notations and other marginalia present in the original volume will appear in this file - a reminder of this book's long journey from the publisher to a library and finally to you.

Usage guidelines

Google is proud to partner with libraries to digitize public domain materials and make them widely accessible. Public domain books belong to the public and we are merely their custodians. Nevertheless, this work is expensive, so in order to keep providing this resource, we have taken steps to prevent abuse by commercial parties, including placing technical restrictions on automated querying.

We also ask that you:

- + *Make non-commercial use of the files* We designed Google Book Search for use by individuals, and we request that you use these files for personal, non-commercial purposes.
- + *Refrain from automated querying* Do not send automated queries of any sort to Google's system: If you are conducting research on machine translation, optical character recognition or other areas where access to a large amount of text is helpful, please contact us. We encourage the use of public domain materials for these purposes and may be able to help.
- + *Maintain attribution* The Google "watermark" you see on each file is essential for informing people about this project and helping them find additional materials through Google Book Search. Please do not remove it.
- + *Keep it legal* Whatever your use, remember that you are responsible for ensuring that what you are doing is legal. Do not assume that just because we believe a book is in the public domain for users in the United States, that the work is also in the public domain for users in other countries. Whether a book is still in copyright varies from country to country, and we can't offer guidance on whether any specific use of any specific book is allowed. Please do not assume that a book's appearance in Google Book Search means it can be used in any manner anywhere in the world. Copyright infringement liability can be quite severe.

About Google Book Search

Google's mission is to organize the world's information and to make it universally accessible and useful. Google Book Search helps readers discover the world's books while helping authors and publishers reach new audiences. You can search through the full text of this book on the web at <http://books.google.com/>

B 476405

ARE WE TO HAVE

A United Medical Profession?

By CHARLES S. MACK, M. D.

PUBLISHED AND FOR SALE BY THE AUTHOR.

LA FORT, ILLINOIS.

1904



PRICE, 25 CENTS, POSTPAID.



Are We to Have a United Medical Profession?



BY CHAS. S. ^{Samuel} MACK, M. D.



Copyright 1904, C. S. Mack.



PUBLISHED BY THE AUTHOR,
LA PORTE, INDIANA.

CONTENTS.

Introduction.....	3
-------------------	---

CHAPTER I.

The Particular Cure of which <i>Similia Similibus Curantur</i> is the Law. Why the Name <i>Homeopath</i>	6
--	---

CHAPTER II.

Dr. Alfred Stillé, Dr. T. Lauder Brunton, Dr. H. C. Wood and Dr. F. W. Headland—each betrays a Lack of Knowledge as to what Homeopathy is, or Purports to be.....	8
---	---

CHAPTER III.

The Universality of the Law of Similars.....	18
--	----

CHAPTER IV.

An Address to Some Students in a Non-homeopathic Medical College.....	21
---	----

CHAPTER V.

Conclusion.....	44
-----------------	----

ARE WE TO HAVE A UNITED MEDICAL PROFESSION?

INTRODUCTION.

J 1-18-05

Enthusiasm over a platform which I believe to be as broad as truth itself and as just as the light of day, does not so carry me away as to let me suppose that any great proportion of the profession will promptly accord to homeopathy the place I do. My claim for this little book is that, by *defining different cures* and by classifying practices, it makes obvious the tenability of an attitude friendly toward both homeopathy and rational medicine, and that it thus illumines a platform from which no man would be excluded because of his friendly attitude toward either.* For years there has been a growing sentiment that an acceptance of homeopathy does not preclude an acceptance of rational medicine; but there seems to have been wanting so evidently logical an expression of this sentiment as to satisfy all that one can consistently accept both rational medicine and homeopathy. It is a common thing to hear one graduated from a college where homeopathy is taught, as a part of medicine, apologize for his use of the other part. This

*Empiricism is not here discussed. I have elsewhere recognized wherein lies its essential feebleness, but that we can never entirely outgrow the practice.

ought not to be. Each graduate from such a college ought to be able to clearly show the consistency of his position in accepting both homeopathy and rational medicine, and also the propriety of his making himself known as a homeopath. Believing that he cannot do this to the best advantage without accurately defining different cures, and showing that the particular cure of which *similia similibus curantur* is the law transcends the possibilities of rational medicine, I offer him this book as of exceeding value to him. It affords a platform upon which he can fight for homeopathy to the death, if need be, and can at the same time pursue rational medicine with an enthusiasm not in the least modified by his enthusiasm over homeopathy.

A very common thing is for one graduated from a college where homeopathy is not taught, to enter upon practice a confirmed opponent of homeopathy—a system of which he has acquired none but most superficial impressions. This statement is abundantly illustrated in *An Address to Some Students in a Non-Homeopathic Medical College* contained in this book. The young gentlemen asking these questions were within a few weeks of graduation. I have not had the pleasure of further acquaintance with any of them, but the presumption is that within a few weeks of formulating their questions they had assumed relations in medical societies which, to say the least, did not conduce to any further knowledge of homeopathy. To graduates of old-school colleges who feel that they lack satisfactory knowledge of what homeopathy really is, I commend this book confident of its adequacy to their needs.

There is among those physicians who do not accept homeopathy as worthy of any particular regard a growing

sentiment in favor of a platform broad enough for themselves and for those who accept homeopathy as well as rational medicine. So far as I am aware no expression of this sentiment has evinced anything like an adequate appreciation of the issue between the schools. The depth and breadth of that issue are simply immeasurable. If, as I believe, *similia similibus curantur* is a law of nature, it is as old as creation, and obtains in all worlds—in the world of thought and feeling as well as in the world of flesh and blood. To the universality of this law we shall presently devote a chapter. So far as I am acquainted with adverse criticisms of homeopathy, no man living has offered such criticism without betraying a lack of appreciation of the real issue between the schools. I offer no apology for this sweeping statement. It is not made upon the spur of the moment. Within the dozen or more years which have passed since I first made it I have become more and more confirmed that it is true. In this book will be found discussion of several adverse criticisms of homeopathy by men distinguished in the field of rational medicine, but evidently not informed in the philosophy of homeopathy. To those who do not themselves accept homeopathy, but are advocating a union of the schools I offer this book as likely to aid them to some adequate conception of the difference which they would adjust. That that difference will sooner or later be adjusted I firmly believe, but never will the schools convene upon a platform which accords less than absolute freedom in regard to homeopathy as an issue. To adjusters I offer this book as suggestive of a platform upon which he who believes in homeopathy and he who does not believe in it could together work in the field of rational

6 *Are We to Have a United Medical Profession?*

medicine, which is common to them both. A *sine qua non* to union upon such a platform is that no one should insist upon forcing his views, *pro* or *con*, in regard to homeopathy upon another: in other words, homeopathy, as a plank in this platform, would be matter of opinion. That there should, at any early day, be a union of the schools seems unlikely. Facts of human nature and of private interest will long postpone such union; but that come it will I believe. This book suggests what, I think, the platform will be when, whether sooner or later, such union is deemed practicable and desirable.

A view frequently advanced is that it is best the schools should not ever unite, but should continue separate until one or the other dies of inanition. If that view proves the right one, well and good. This book will still have been useful by helping to make clear the real issue, and by thus hastening the death of error and the general acceptance of truth.

CHAPTER I.

THE PARTICULAR CURE OF WHICH *SIMILIA SIMILIBUS*
CURANTUR' IS THE LAW. WHY THE NAME
HOMEOPATH.

In much that has been offered as adverse criticism of homeopathy, the subject of homeopathy really has not been touched upon at all—this, because the critic has not recognized, as different from other cures, that particular cure of which *similia similibus curantur* is the law. The peculi-

arity of that cure lies not in the final outcome, but in the immediate effect* of the medicine. In a case of typhoid fever the outcome, or remote effect, may be health whether the medicine given be homeopathic, or be stimulant, or be germicidal, or be chemically antidotal, or be something else; or the outcome may be health when no medicine at all is given. In a case of typhoid fever the immediate effect of a stimulant is different from that of a germicide, and the immediate effect of either is different from the immediate effect of a chemical antidote. Unlike the immediate effect of any one of these, the immediate effect of a homeopathic medicine is a change from what is abnormal to what is normal (or approximately normal) in vital processes. Of course when these processes become normal (or approximately so) their effects too will. This, then—an immediate change from what is abnormal to what is normal (or approximately normal) in vital processes—characterizes the particular cure of which *similia similibus curantur* is the law. One cannot in rational practice attempt this cure, for in rational practice there must always be sought an immediate end *in itself* knowable, as a change in vital processes is not: it is knowable only *in its effects*.

That the cure of which *similia similibus curantur* is the law transcends the possibilities of rational medicine is a reason which, were there none other, would be all-sufficient for one's identifying himself by name with homeopathy. By the name *homeopath* he would make known his attitude upon what is far and away the most important issue in the

*The word **immediate** here has no reference to time. It simply means the effect to which no other effect is mediate.

medical world today, viz: homeopathy; and would distinguish himself from those who regard rational practice as the *ne plus ultra* in medicine.

CHAPTER II.

DR. ALFRED STILLE, DR. T. LAUDER BRUNTON, DR. H. C. WOOD
AND DR. F. W. HEADLAND—EACH BETRAYS A LACK
OF KNOWLEDGE AS TO WHAT HOMEOPATHY
IS, OR PURPORTS TO BE.

I believe that no one who has disallowed homeopathy's claim has understood what that claim is. This sweeping statement would be weak unless exemplified. Each of the above-named, honored for his services to rational medicine, has betrayed, in his published criticism of homeopathy, that really he did not understand what homeopathy's claim is.

Says Stillé*.

"It was a distorted and exaggerated perception of the principle of substitution in the cure of disease that led Hahnemann to adopt it as an exclusive dogma, * * *"

Hahnemann's theory, that a homeopathic remedy cures by substitution, was erroneous and must be disallowed. No one need quarrel with substitution as a part of rational medicine, but as an explanation of that cure which transcends the possibilities of rational medicine—an immediate transformation from what is abnormal to what is normal (or approximately so) in vital processes—the theory of

*Therapeutics and Materia Medica, Fourth Edition, Vol. I, p. 256.

substitution evidently will not at all serve. Viewed from a standpoint in nature a law of nature is an ultimate fact. Any attempt to explain from such a standpoint the *modus operandi* of effects under one of nature's laws is futile. Hahnemann seems not to have seen this. Shall we add that he seems not to have defined to himself, as accurately as we would now have it defined, the particular cure of which *similia similibus curantur* is the law?

In his Introduction to the work I have just quoted Stillé says*:

"With scarcely an exception, substances which, in a certain dose, are capable of destroying life, are also, in a certain less amount, adequate to save life." Good! He continues: "Their deleterious action is only an excess of their salutary action; and, generally, the former is proportioned to the latter."

So far as concerns the use of dynamic drugs in rational practice for the sake of their pathogenetic effects upon man, it is true that any salutary action immediately (*i. e.*, not secondarily) resulting from their use is, in kind, the same as the deleterious action of larger doses. But right here I would fix attention upon the fact that the salutary action sought in any given practice of homeopathy is distinctly *not* the same in kind as the deleterious action of larger doses, but is an immediate transformation from what is abnormal to what is normal (or approximately normal) in vital processes. Upon this point I would rivet attention until it is thoroughly understood. When one gives morphine as an anodyne, atropine as a mydriatic, ergot as a contractor of vessels, strychnine as an excitant—when, in

*Vol. I, p. 18.

short, he in rational practice uses any drug for the sake of its pathogenetic effect upon the patient, the action he sets up is *in kind* the same as the deleterious action of that drug in fatal or serious poisoning; but what he attempts with any one of these, or of other dynamic poisons, as a homeopathic remedy, is to immediately transform from what is abnormal to what is normal (or approximately normal) vital processes, and to do this is to set up an action distinctly *not* the same in kind as the deleterious action of the drug in larger doses. Stillé continues:

“In this, medicines obey a general law under which every capacity for good is equally a capacity for evil. Light and heat, the vivifiers of the universe, would become the most powerful agents in its destruction were their operation, uninterrupted and intense.”

That there is “a general law under which every capacity for good is equally a capacity for evil” is true, but under that law there are sub-laws—subdivisions, and to speak as if dynamic poisons fell in the same subdivision as do light and heat is a most serious error; it is, practically, an error which has for centuries led astray medical thought and medical practice. Under the same subdivision as falls harm from excess of heat or from excess of light, falls harm from excess of food eaten or from excess of water drunk; but under an entirely different subdivision falls the effect of a dynamic poison as a homeopathic remedy. Under the general law stated by Stillé is a sub-law according to which a capacity for good attaches to those things which, in themselves, are evil and not good. Under this sub-law an evil *from without* may effect a cure, *from within*, of a like evil. Under this sub-law, to the universality of which

we shall presently devote a chapter, falls the use of dynamic poisons as homeopathic remedies. Failure to recognize under the general law stated by Stillé (viz., "every capacity for good is equally a capacity for evil") two sub-laws under one of which fall the use and abuse of agents which in moderation are hygienic, and under the other of which fall the harm and the use of agents which are essentially noxious and never hygienic—failure, I say, to recognize these two sub-laws has led astray not only Stillé, but, through centuries, many thinkers and writers upon medicine, and, in their wake, multitudes of practitioners. Through all future ages, the man who fails to recognize these two subdivisions under the general law will, of necessity, fail to understand the philosophy of homeopathy.

T. Lauder Brunton* says:

"This opposite action of large and small doses seems to be the basis of truth on which the doctrine of homeopathy is founded. The irrational practice of giving infinitesimal doses has of course nothing to do with the principle of homeopathy—*similia similibus curantur*; the only requisite is that mentioned by Hoppocrates, when he recommended mandrake in mania, viz.: that the dose be smaller than would be sufficient to produce in a healthy man symptoms similar to those of the disease. Now in the case of some drugs this may be exactly equivalent to giving a drug which produces symptoms opposite to those of the disease; and then we can readily see the possibility of the morbid changes being counteracted by the action of the drug, and benefit resulting from the treatment. For example, large doses of digitalis render the pulse extremely rapid, but

**Pharmacology, Therapeutics and Materia Medica*, adapted to the U. S. Pharmacopœia by Francis H. Williams, M. D., third edition, pp. 36, 37.

moderate ones slow it. The moderate administration, when there is a rapid pulse, is sometimes beneficial; this might be called *homeopathic* treatment, inasmuch as the dose administered is smaller than that which would make the pulse rapid in a healthy man; but it might also be called *antipathic*, inasmuch as the same dose administered to a healthy person would also slow the pulse."

It is evident that Brunton does not understand the subject of homeopathy. As surely as that two wrongs never made a right, the immediate resultant of two abnormal forces (one of disease, the other of drugs, whether it is in primary or in secondary effects that it shows itself) is not exactly, or approximately, health—is not the cure of which *similia similibus curantur* is the law.

That with one abnormal force you can so antagonize another abnormal force that the immediate resultant will be health, is a mistaken notion which seems to have, through the ages, misled the profession. If you dilate a pupil with a mydriatic and then contract it with a myotic, the result may be a pupil which looks as if it were normal, but which is not normal; that pupil is farther from normal than it would be if only dilated with a mydriatic or only contracted with a myotic, though in either of the latter cases it would not look as normal as it does when under the influence of both these poisons together. I can not doubt that an immense deal of practice with contraries has been based upon the mistaken idea that the immediate resultant of two antagonistic abnormal forces can be health. When we talk of contraries in medicine we should remember that there are two kinds of contraries. One dynamic agent may be called contrary to another when the trend of the two is in diametrically opposite directions from the standard found

in health; such opposites are mydriatics and myotics, stimulants and depressants, drugs which dilate vessels and those which contract them. I think that we can demonstrate only comparatively few such contraries; what is such a contrary to inflammation, headache, darting pain, stabbing pain? This kind of contrariety between dynamic agents may be compared with the contrariety between two falsehoods, as an understatement and an overstatement regarding some fact. The other kind of contrariety between dynamic agents is that which obtains between health and any abnormal dynamic force. This kind of contrariety may be compared with that which obtains between truth and any falsehood. The immediate resultant of two contrary abnormal dynamic forces (one, a disease-force—the other, a drug force) is not health, (the opposite desiderated) or anything approximate thereto, but is something comparable with the resultant when two opposing falsehoods are blended.

Dr Brunton continues:

“Homeopathy can therefore not be looked upon as a universal rule of practice, and the adoption of any such empirical rule must certainly do harm by leading those who believe in it to rest content in ignorance instead of seeking after a system of rational therapeutics.”

I am not sure that the great majority of homeopaths are less interested in rational medicine than is the average old-school practitioner. Certainly there would be no inconsistency in one's being enthusiastic both over homeopathy and over rational medicine. This becomes perfectly plain when one understands just what is the particular cure of which *similia* is the law, and that *similia* is the law of nothing else. As to the homeopaths' resting “content in ignor-

14 *Are We to Have a United Medical Profession?*

ance," a few words may be said. The cure of which *similia* is the law transcends the possibilities of rational medicine, for it involves an immediate change from what is abnormal to what is normal (or approximately normal) in vital processes. These processes *per se* lie beyond the ken of inductive science; as a natural scientist, one must (whether "content" or not) remain "in ignorance" of them *excepting as they are manifested in effects*. That in regard to these processes *per se* one, as a natural scientist, must remain "in ignorance" is the very reason why we can not in rational practice attempt that cure of which *similia* is the law. The homeopath may have for rational practice precisely the regard that the old-school practitioner has; but while to the old-school practitioner rational practice is the *ne plus ultra* in medicine, to the homeopath it is not;—he aspires to something better and would, so far as practicable, undertake the realization of it.

H. C. Wood* says: "The term or expression *indication* for a given remedy, being in constant use, ought to be distinctly understood; by it is meant the pointings of nature, or, in other words, the evident needs of the system. Thus, hard faeces collected in the colon are an indication for a purgative of such character as will produce watery secretions to soften them. Relaxation in a part indicates a remedy that will awaken into new life the natural contractility of the part,—*i. e.*, an astringent. Again, the suppression of secretion from over-excitement, or from irritation, is an indication for some drug which will allay irritation; while the same suppression, when dependent upon torpor or loss of cell-activity, will call for an excitant,—an irritant. The childish absurdity of treating symptoms by any such law as

*Therapeutics: Its Principles and Practice, eighth edition pp. 101, 102.

"similia similibus curantur" or *"dissimilia dissimilibus curantur"* is at once apparent. The same symptoms may be the result of absolutely antagonistic conditions and require absolutely opposite treatment. Without occupying space with details, one example will suffice. Either irritation or depression of the stomach may cause vomiting. Therefore in one case of vomiting a stomachic stimulant such as ipecacuanha, which when given freely in health will produce vomiting, may relieve the nausea because the depressed stomach needs a stimulation to bring it to the normal level; in another case a stomach which rejects food because it is irritated needs a sedative like bismuth, which in health will not produce vomiting. In the first case the law of similars seems to hold good, in the second the law of dissimilars appears to be dominant. A law of nature has no exceptions. If an alleged law of nature has exceptions, it is not a law. * * * It is plain, therefore, that neither of the alleged therapeutic laws of similars or dissimilars is, in truth, a law. They are the results of coincidence, the expressions of half truths."

Here Dr. Wood discusses rational practice and homeopathy as if they were of one piece. Evidently he does not see that the cure of which *similia similibus curantur* is the law is different from any cure which can be effected in rational medicine. What he would effect in the supposed cases of vomiting, either with stimulant ipecacuanha or with sedative bismuth, is the resultant of two abnormal forces (the one of disease, the other of drug) and is entirely distinct from that cure of which *similia* is the law. I think Dr. Wood is mistaken if he supposes that a depressed stomach can be brought immediately (*i. e.*, not secondarily) to "the normal level" by "a stomachic stimulant such as ipecacuanha." The immediate resultant of two abnormal forces (here the depressant force of a disease and the

stimulant force of a drug) cannot be normal; the immediate effect of the stimulant ipecac is not an approximation to the normal state, any more than is the immediate effect of a mydriatic upon a pupil which has already been contracted with a myotic. For like reason the immediate effect of "an astringent" cannot be to "awaken into new life the *natural* [italics mine] contractility" of a part. Dr. Wood says that by "the term or expression *indication* for a given remedy is meant the pointings of nature, or, in other words, the evident needs of the system." That is all right so far as rational practice is concerned—in that practice we can attend to what seem to us "evident needs of the system;" but in attempting that cure of which *similia* is the law we would, under guidance of the law, meet "needs of the system" which are by no means "evident" to us as natural scientists—needs which, indeed, *per se*, are entirely beyond the range of inductive science, and can be met only under guidance of a *law of nature*.

Dr. Wood continues:

"Symptoms are, indeed, but the surface-play of disease" (good!), "and the rational therapist always seeks their hidden meaning."

The proximate cause of this "surface play" he, in a given case, may or may not find; but vital processes, which are a constant factor in the production of disease effects, he, as a natural scientist, never can know *excepting as they are manifested in effects*. Only under guidance of *similia* (which states the requisite relation between disease *as known in effects* and dynamic drugs *as known in their unmodified effects*, i. e., in *materia medica pura*), can one intelligently attempt that cure of which *similia* is the law.

Before citing what Headland says specifically on the subject of homeopathy I will quote something which he says earlier, on page 18 of his book*:

"Thus, for the proper perfection of medicine as a rational science, two things are in the main needed: the first is a right understanding of the causes and symptoms of disease; the second, a correct knowledge of the action of medicines. When our acquaintance with these two subjects is complete, we shall be able to do all that man can by any possibility effect in the alleviation of human suffering."

It is perfectly evident that Headland regards rational practice as the *ne plus ultra* in medicine—that he does not believe in a cure which transcends the possibilities of rational medicine, a cure of which *similia similibus curantur* is the law.

When Headland comes (on pages 52 and 53) to speak specifically of homeopathy, what he says is perfectly consistent with his previously expressed view that rational practice is the *ne plus ultra* in medicine. He does not even recognize any question whether *similia* may be the law of a cure transcending the possibilities of rational practice. He discusses *similia* as a "rule"—cites three diseases similars to which he thinks cannot be produced by drugs, and then says: "When such remedies" (similars to these diseases) "are known, their employment would certainly be singularly objectionable." The opinion he thus expresses is such as is perfectly in order when a question in rational practice is

***The Action of Medicines in the System.** Ninth American Edition. Philadelphia: P. Blakiston, Son & Co. 1882. To the original draft of this Essay, here published in book form, the president, officers and fellows of the Medical Society of London awarded the Fothergillian gold medal for 1852.

discussed, but is entirely out of order when considering a drug indicated by a law of nature. I criticize no one for questioning whether *similia similibus curantur* is a law of nature, but if it is such a law, no appeal from it to human reason is allowable—no reversal, by human reason, of the law's dictate. Does one reject the indications of the law of gravity because effects under it transcend the capacity of his reason? Does he say of measures indicated by the law of gravity that "their employment would certainly be singularly objectionable?" No! When one accepts the law of gravity he, for the reason that "a law of nature is an ultimate fact," does not expect to fully understand how effects under it are operated. If *similia* is a law of nature, how effects under it are operated transcends the capacity of natural reason, and an opinion that certain remedies indicated by that law "would certainly be singularly objectionable" is entirely out of place. Neither Headland nor any one else will ever understand homeopathy so long as he is preoccupied by the opinion that rational practice is the *ne plus ultra* in medicine.

I close this chapter as I began it: I believe that no one who has disallowed homeopathy's claim has understood what that claim is.

CHAPTER III.

THE UNIVERSALITY OF THE LAW OF SIMILARS.

Some of the critics of homeopathy seem to think that the law of similars, to be universal, would have to be the only law in medicine. This notion is entirely incorrect. If

similia similibus curantur were the only law in medicine, that would not make it universal, for medicine is not the universe. The universality of the law of similars lies in the fact that the law obtains throughout the universe—no less in the world of thought and feeling than in the world of flesh and blood. It is under the law of similars that you correct another's fault (whether of body, mind or heart) *immediately*, i. e., without producing conditions mediate to the cure. Here is a man with an incorrect notion in his head. There are various way of helping him. You may remove that which, in his environment, encourages in him the false notion; you may interest him in some other subject, and thus render for a time quiescent the erroneous notion; you may by persuasion or coercion check or modify his expression of that notion; there are lots of things you may do, but there is only one way in which you can set him right immediately;* and that is by pointing out to him his error—picturing it to him, and appealing to him for correction *from within*. Again, here is a man whose fault is not of head, but of heart; what you want to correct in him is not an error in thinking, but an error in willing. There is no other way of doing this *immediately* than by pointing out to him his error—picturing it to him, and appealing to him for correction *from within*. And that is just what, in case of disease, a homeopathic drug does—it pictures the abnormal condition which is present—points it out, and looks for correction *from within* the patient. Of course, a perfectly good homeopathic medicine may fail to produce

*The word *immediate* predicated of the cure of which *similia similibus curantur* is the law has no reference to time. It simply means that the cure is the first effect of the remedy—that there is no effect mediate to the cure.

results, just as the most accurate picturing of a fault in thought or feeling may fail as a means to correction from within; he whom you would help may not respond.

It has been the habit to think of homeopathy only as one system of drug-giving. Again and again it has been said that if homeopathy, as a system of medicine, is true, it stands alone, solitary, unrelated to anything else in human experience. Now, the fact is that in the world of thought and feeling nothing is more familiar to us than homeopathic practice—homeopathic treatment. “Johnny, don’t do this,” “don’t do that,” “don’t be so rough,” “don’t eat so fast.” Perhaps weight is added to the interdiction by a mimicking of Johnny’s rough ways, fast eating or what not. If Johnny desists merely from fear of punishment, a homeopathic cure is not effected. But if he is led to picture to himself his fault, and to, from within, mend his ways, a homeopathic cure results. Such a cure can never be forced upon one; it always results when the instructive picturing, from without, of a fault, leads to voluntary correction from within. What would home discipline be, and reform movements, were there no law of similars? It is probable that Hogarth’s pictures of the idle apprentice have effected many a homeopathic cure. It is under the law of similars that ridicule and satire produce their best results; to that law is due the efficacy of much that is most useful in literature and the drama. So far from being unrelated to our experiences outside of medicine, homeopathy in medicine is a part of homeopathy universal, which is as familiar to us as is the air we breathe, or the light of day.

Nothing has stood more in the way of homeopathy in medicine than the utterly false notion that it is strange,

queer, unlike anything else, and, therefore, improbable. When we consider the power of prejudice we can but wonder at the headway homeopathy, in medicine, has made in spite of its supposed improbability. As times goes on it will more and more be seen that, so far from being improbable, it is the natural thing to expect that in medicine, as elsewhere, similars should cure.

CHAPTER IV.

AN ADDRESS TO SOME STUDENTS IN A NON-HOMEOPATHIC MEDICAL COLLEGE.

[Copyrighted 1890, 1897 and 1904 by C. S. Mack.]

[In the spring of 1890 I accepted an invitation from some students in the Department of Medicine and Surgery in the University of Michigan to speak to them upon the subject of homeopathy. They handed me their written questions some days before the time appointed for our meeting.—C. S. M.]

I. *Do you believe in trying to ascertain the causation of disease, and in using the knowledge thus gained as a basis for treatment?*

Any cause knowable to inductive science otherwise than in effects is proximate: this is true whether we speak of causes of disease or causes of any other phenomenon. I believe in searching out and avoiding or removing proximate causes of disease by any means not harmful to patients.

That you may understand the subject of homeopathy, I would ask you to first note what is the particular cure of

which *similia similibus curantur* is the law. That particular cure is an immediate change from what is abnormal to what is normal (or approximately normal) in vital processes. The word *immediate* in this definition has no reference to time: it simply means that a normal (or approximately normal) condition of vital processes is the first effect of the drug—that there is no drug-effect mediate to it. You see right away that this cure differs, though not necessarily in the final outcome, in process from the cure effected by an immediate attack upon a proximate cause of disease. You further see that one cannot, in rational practice, attempt the particular cure of which *similia similibus curantur* is the law; for in rational practice there must always be sought an immediate end *in itself* knowable, as a change in vital processes is not: it is knowable only *in its effects*. You still further see that an acceptance of *similia similibus curantur* as the law of this particular cure is not at all inconsistent with an acceptance of rational practice, in which the cures effected are different from this.

2. *Do you believe that practice based on any other principle than "Similia similibus curantur" ever cured disease?*

I think you will be more apt to understand homeopathy, if you fix in your minds the idea that homeopathic treatment is invariably and essentially treatment of a *patient*, and aims at the cure of the *patient*. It is with a definite and correct idea that many homeopaths object to expressions such as *cure disease homeopathically, treat disease homeopathically, etc.*

That various practices based on principles other than *similia* may be useful I have no question, but only with a similar can be effected that particular cure of which *similia*

similibus curantur is the law. That one identifies himself by name with that law, does not mean that he disparages useful practices based upon other principles. What it does mean is that he is not of those who regard rational practice as the *ne plus ultra* in medicine.

3. *If disease is to be treated symptomatically, why should the physician trouble himself to learn about physiology, pathology, chemistry, urinalysis and kindred sciences?*

Permit me, before discussing this question, to amend it so that it shall read: *If patients are to be treated symptomatically, etc.* If by *symptomatically* is implied that among disease effects and drug effects subjective symptoms only are admissible as indications for a homeopathic remedy, I say that I do not believe in this restriction. I believe that any unmodified disease effect (subjective or objective) and any unmodified dynamic drug effect (subjective or objective) may properly find place among indications for a homeopathic remedy.

In answering this question I shall assume that by *physiology* you mean the inductive science of normal vital processes as known in their proximate causes and in effects, and that by *pathology* you mean the inductive science of abnormal vital processes as known in their proximate causes and in effects. Now, the only possible way of recognizing, as abnormal, disease effects (subjective or objective) or unmodified dynamic drug effects (subjective or objective) is by comparison with the effects of normal vital processes. Not only is a knowledge of physiology and pathology essential to the practice of homeopathy at any given time, but endless advancement in those sciences is

24 *Are We to Have a United Medical Profession?*

among the essentials to endless advancement in the art of practicing homeopathy. Nothing could be more erroneous than the notion that to practice homeopathy is to ignore science.

As regards the sciences *chemistry* and *urinalysis*, I would say that only through them can we become acquainted with some disease effects and with some unmodified dynamic drug effects, which disease effects and drug effects may be of the utmost value among indications for a homeopathic remedy. To illustrate: albumen and casts in the urine are among unmodified dynamic effects of many a drug. The science *chemistry* not only is essential to the ascertainment of various disease effects and unmodified dynamic drug effects with a view to selection of homeopathic remedies, but is essential to various of our practices in rational medicine, as are, too, physiology and pathology.

4. *Would not the perfect homeopathic medicine be such an one as would produce ALL the symptoms in the disease for which it is given?*

The word *like* is not synonymous with the word *identical*. Homeopathy is not isopathy. Let me amend your question so that it shall read: *Would not the perfect homeopathic medicine be such as would produce effects similar to ALL those of the disease by which it is indicated?* An ideal homeopathic medicine would produce effects similar to *all* those of the disease by which it is indicated. Remember, however, that *similar* is a comparable adjective, and that a drug may be more or less curative in proportion as it is (in unmodified dynamic effects) more or less similar to a disease. In selecting a similar it is customary to consider simiarity between the total disease effects and the

total drug effects, but to accord special weight to unusual similarity between individual disease effects and individual drug effects.

Either your phrase *the perfect homeopathic medicine*, or my phrase *an ideal homeopathic medicine* may serve as occasion for the following remark: In any given case no medicine could be so homeopathic that one more homeopathic was not predicable, which fact is essential to the belief that the art of practicing homeopathy is capable of endless development.

5. *Do you aim to give, according to this principle, medicines which do produce in the healthy person the same pathological conditions as are present in the disease?*

As I have just said, *like* is not *identical*—homeopathy is not isopathy. I, therefore, amend your question so that it shall read: *Do you aim to give, according to this principle, medicines which do produce in the healthy person pathological conditions similar to those produced by the disease?* A homeopathic medicine is one which, taken in health, does or *would* produce pathological conditions (subjective or objective) similar to those produced by the disease present. I say “does or *would*.” There is no trouble whatever about inducing in perfectly harmless provings a multitude of definite drug effects; but we cannot, of course, seriously or fatally poison human beings for the sake of learning a drug’s pathogenetic effects. Very many of the most marked unmodified dynamic drug effects in human beings, either objective (as tissue changes in the viscera) or subjective, are known to us only from criminal poisonings, or from accidental poisonings, or from those cases in which poisons when used as medicines have produced serious (sometimes

fatal) consequences. There is on record, aside from what we technically call *provings*, a vast deal regarding the most extreme subjective and objective pathogenetic effects of drugs in human beings. From what is known of comparative drug pathogenesis we may sometimes with considerable confidence infer from experiments upon the lower animals what would be in human beings effects which we are not justified in producing in them by one or another drug. Effects thus inferred may serve provisionally among the data upon which is based the selection of homeopathic remedies in practice upon human beings.

6. *Does the homeopath of the present day practice according to the principles laid down by Hahnemann in his Organon?*

7. *If not, why not?*

8. *If not, in what respects have the principles changed, and why have they so changed?*

These three questions I shall consider together, beginning with the remark that principles *never* change. It is quite possible that Hahnemann regarded as principles some things which are *not* principles. Of various principles there is but one which is today recognized by all homeopaths, and is at the same time distinctive of homeopathy; that principle is what the word *homeopathy* implies, viz.: *Similia similibus curantur*. In accepting that principle homeopaths are at one: regarding various other matters they are not at one. Conspicuous among the questions upon which homeopaths differ among themselves, is that of dosage. An idea which some homeopaths have expressed is that there is a still undiscovered law of dosage. This idea strikes me as reasonable: indeed, would it not be

unreasonable to believe that there is not, and cannot be, a law of dosage?

Do not suppose that homeopathsists regard *similia similibus curantur* as a thing invented by Hahnemann or some other man; no, we regard it as a law of nature—a principle true in the very nature of things, and discovered, not invented, by man.

9. *Do you believe that the power of a medicine to modify disease lies in its chemical affinities, or is it due to some power which uses the medicine as a vehicle?*

Chemical affinities are not matter: *they* use matter as a vehicle. So of physical properties—so of dynamic properties: none of these properties is matter—each of these properties uses matter as a vehicle. A medicine may be used for the sake of its physical properties (e. g. demulcent drinks), or for the sake of its chemical properties (e. g. acids or alkalies to change chemical reaction of gastric juice already in the stomach), or for the sake of its dynamic properties. Dynamic properties in a drug are those which render it an immediate modifier of the *quality* of vital processes. Please understand the force of the word *quality* in this definition: I shall illustrate it by what I suppose is true of effects upon an adult's heart of, on the one hand, half an ounce of brandy—and, on the other hand, ten drops of the tincture of digitalis. The brandy would simply increase the *force* of the heart's action: if the *quality* of that action had previously been normal, it would still be normal; if the *quality* had been abnormal, it would still be abnormal. The digitalis would modify not only the *force* but also the *quality* of the heart's action.

The reason why we homeopathsists talk so much about

28 *Are We to Have a United Medical Profession?*

the dynamic power of drugs is that only by reason of its properties as an immediate modifier of vital processes (*i. e.* only by reason of its dynamic properties) can a drug be a homeopathic medicine. Homeopathy does not speak of drugs otherwise than as dynamic agents.

10. *Do you believe that trituration adds any power to a medicine other than to make it more quickly and easily assimilated?*

I rather think that trituration affects a drug (as a dynamic agent) merely by subdividing particles, and thus putting them into a condition in which their dynamic properties are more effective. I question, by the way, whether a medicine in inducing its dynamic effects is assimilated.

11. *Supposing that some definite chemical poison were proven to be the cause of an acute disease, would you (a) still treat the disease symptomatically, or would you (b) try to find and use a chemical antidote?*

Homeopathic treatment is a treatment of the patient with a remedy homeopathic to disease as manifested in him. If I proposed to effect in a patient, in the circumstances supposed, the particular cure of which *similia similibus curantur* is the law, I should treat him with the medicine which seemed most homeopathic to disease as manifested in him. Now, aside from homeopathy, if I definitely knew that a chemical poison were the proximate cause of his disease,—if, too, I accurately knew the chemistry of that poison, and accurately knew a chemical antidote,—and if, moreover, I knew that the chemical antidote would be harmless to my patient, I should have no objection to trying such antidote. The cure effected with that

antidote would be a different cure from that of which *similia similibus curantur* is the law.

I take it that this question is asked in view of the theory, perhaps we could safely say *fact*, that in some instances disease is due to bacteria and ptomaines as proximate causes. I understand that those who have most studied this particular subject regard as unpromising any attempt to kill bacteria or to chemically antidote ptomaines by introducing germicides or chemicals into the patient's circulating blood, without harming the patient. I am not much drawn toward schemes for administering internally chemical antidotes to chemical poisons in the circulating blood or other living tissue of the body, but I shall be glad if any who are so drawn shall in the future have developed some useful practice.*

12. *Do you think that a medicine can act as a chemical antidote when given in the third dilution on a scale of X, when the poisoning has been sufficient to produce symptoms such as are found in the severer forms of scarlet fever, small-pox, and septicaemia?*

As a chemical agent, the force of one drug in its third decimal dilution might differ greatly from the force of another drug in its third decimal dilution.

Upon inquiry I learn that this question is asked in view of ptomaines. To confidently and finally answer to it either *yes* or *no*, with a view to, among other things, the patient's safety, would imply a greater knowledge than I

*Jan. 1904. Serum therapy, developed since the above was written, is of interest. I regard it as neither useful in the present nor promising for the future. There is no inconsistency in accepting both it and homeopathy.

possess (and, I think, than anyone possesses) of various sciences. This question, by the way, has nothing whatever to do with the subject of homeopathy.

Your allusions to "the germ theory of disease" suggest the following: I think we should be safe in concluding that germ-killing by internal administration of germicides, could never rank very high among arts. Supposing that there is ahead of us the discovery of a germicide with which it will be practicable to, for instance, by internal administration kill typhoid germs; what are we to do for our patients meantime? Furthermore, it is supposable that, when such a germicide had become known, the art (so far as concerns typhoid fever) should be perfect. One reason for my belief that the practice of homeopathy will forever rank very high among arts is, that it recognizes a constant law under which a remedy may be more or less curative, and under which the art is capable of endless development; for in no case could a medicine be so homeopathic that one more homeopathic was not predicable.

13. *In your provings do you refer to the symptoms produced by dilutions, moderate sized, or decidedly toxic doses?*

Proving is used by homeopaths as the technical name for an experiment in which a dynamic poison is given to a human being in health, to ascertain what are unmodified dynamic effects of that poison: obviously such experimentation can be practiced only within limits. As I have already said, there is on record a vast deal regarding unmodified dynamic effects in human beings of poisons taken in such quantities as to induce alarming or fatal effects. I believe it is proper that any unmodified dynamic effect pro-

ducible by a poison in human beings should have a place in the *Materia Medica Pura*, and should have due weight as an indication for the use of that poison as a homeopathic remedy.

14. *Do you believe that certain drugs have a more potent action upon disease (functional or structural) affecting one side of the body than upon the other?*

If so, how do you explain the belief that medicines, entering the system through the same channels, passing into the circulation have the power to select the right or left side of the body (as the case may be)?

Let me preface my answer to this question by remarking that whether a drug may affect one side, rather than the other, of the body is a question regarding the science of drug pathogenesis, and is entirely aside from a question whether similars cure.

From the form in which these two questions are put I infer that they are asked by one who thinks there is *a priori* reason for believing that a drug's dynamic effects cannot be evidenced in one side, rather than the other, of the body. Why should they not? Of food which enters the stomach why does one particle go to the bones, another to the muscles, another to the nerves, another to the hair, etc.? I do not know in detail; nor does any man. Why are conspicuous dynamic effects of one drug manifested in bones—those of another in nerves—those of another in the kidneys—and those of still another in the lungs? Again, I do not know in detail. That the functions of one side of the body are not identical with those of the other side may, I suppose, be taken as proved. Why are most people right-handed? You may think that they are so simply as a result of

chance causes:—I suspect that there is some definite reason, and that right-handedness is not a result of essentially unreasonable chance. Do you think there is any *a priori* ground for concluding that the centre for one function may not be in one hemisphere of the cerebrum, and the centre for another function in the other hemisphere? Is Broca's centre usually on the left side? The foregoing may raise in your minds a doubt as to whether there is any *a priori* reason whatever for assuming that a dynamic poison may not affect one side, rather than the other, of the body. Let us, then, regard the question *whether a drug may affect one side, rather than the other, of the body* as merely a question of fact; and to determine this question of fact I know of no way more promising than to consider the evidence already on record, and to further experiment with drugs upon living beings in health with a view to observing what, as matter of fact, are unmodified dynamic effects producible by drugs.

The very reason why one cannot, unless under guidance of a law, intelligently attempt the particular cure essayed with a homeopathic medicine, is that, excepting in proximate causes, inductive science can know drugs, as dynamic agents, or disease only *in effects*. To the question: *if a drug's dynamic effects may be manifested on one side, rather than on the other, of the body, how do you explain the fact?* I should reply: I do not explain it.

15. *If you gave quinine in malarial fever, in what doses would you give it? Do you give any form of mercury in syphilis? What symptoms call for its use according to the principle of "Similia similibus curantur?"*

If a homeopathist concludes on purely a *posteriori*

grounds (as I do not) that quinine is of benefit to all malarial patients, he is entirely at liberty to empirically give quinine to such patients in whatever doses he thinks experience has shown most useful. Aside from this purely empirical practice, a homeopathist may give quinine to a malarial patient in the hope of killing germs in the circulating blood.* Again: a homeopathist may give quinine to a malarial patient in the hope of supplying to the tissues a substance which was present in them in health, but is absent from them under the influence of malaria.** Some homeopathists regard cinchona (or quinine) as homeopathic to malarial fever in its commonest manifestations: I do not. If I were giving quinine to a malarial adult, I should be apt to begin with the first centesimal trituration, and to at least avoid inducing extreme pathogenetic effects of the drug.

You ask: *do you give any form of mercury in syphilis?* I should very cordially disapprove of a routine practice of giving to all syphilitic patients mercury in amounts sufficient to induce extreme pathogenetic effects, but I agree with those who believe that to syphilis in many of its manifestations mercury (either the metal itself or various of its salts) is more or less homeopathic. Among disease effects by which it may be indicated as homeopathic to syphilis I mention general cachexia with abortions or premature births, swelling of lymphatic glands, swelling and inflammation of periosteum and bones, some cutaneous eruptions

*See Biddle's *Materia Medica and Therapeutics*, eleventh edition, p. 148.

**See H. C. Wood's *Therapeutics, Materia Medica and Toxicology*, third edition, p. 75. See eighth edition, too, pp. 597-8.

and falling of the hair. Regarding similar effects from mercury, which are markedly induced among those constantly exposed to mercurial vapors (as are those engaged in various arts, or dwelling in the neighborhood of factories from which mercurial vapors are emitted) there is considerable record. Of such records I know none better than that contained in Stillé's *Therapeutics and Materia Medica*.^{*} Read all that Stillé says regarding the pathogenetic effects of mercury, and you will find your present question pretty well answered. From what he says I quote: "It has long been a question, and is one not yet fully determined, how far mercury may operate to produce disease of the bones. The tendency of syphilis to develop these affections is well known, and also the great frequency of their occurrence in syphilitic cases treated by mercury, yet it is certain that they sometimes follow the administration of this medicine in cases wholly free from a syphilitic taint. Mercurial nodes, it is said, precede the ulcers, and the destruction of tissue proceeds from without inwards. They most frequently are seated in the spongy bones of the base of the cranium, or in the ends of the long bones. (*Canstatt*).

"Mr. Spence reports the case of an old woman who had never been affected with syphilis, but had taken large quantities of mercury. After suffering from pains in the head, ulceration began in the soft parts over the os frontis, involving the bone and dura mater, and ultimately exposing the brain. After death an abscess was found in the substance of the brain."

The following is from S. O. L. Potter's *Materia Medica*,

^{*}Fourth edition, Vol. II.

Pharmacy and Therapeutics, p. 220: "Indeed, as Dr. Ring-
"er said in the earlier editions of his *Handbook of Thera-
"peutics*, the phenomena produced by mercury are singular-
"ly similar to those which will result from syphilis, and the
"serious symptoms known as secondary and tertiary syphilis
"can be produced both by syphilis and by mercury." Whar-
ton and Stillé in their work on Medical Jurisprudence*
quote a statement that "'Syphilis alone can be confounded
with chronic mercurial poisoning.'" My impression is that
not only in various books on *Materia Medica*, but also in
periodical medical literature you can find, both from
homeopaths and from non-homeopaths, a good deal
regarding the similarity between effects of syphilis and un-
modified dynamic effects of mercury in human beings.

16. *If you do not give mercury in syphilis, do you give
minerals in any disease? Do you give opium in any form?*

There are many minerals which are dynamic poisons, and
which have been conspicuously used in homeopathic prac-
tice ever since homeopathy became known.

Opium in various dilutions or triturations has been
much used as homeopathic, where disease effects were more
or less similar to unmodified dynamic effects producible by
opium in human beings.

Aside from homeopathy and the cure peculiar to it,
opium may be used as an anodyne, *i. e.* to benumb a patient,
and render him insensible to pain. Without regard to what
is the proximate cause of a given pain, or to what part of
the body is affected, you sometimes can by inducing in
your patient more or less insensibility as a pathogenetic
effect of opium (or morphine) render him insensible to pain.

*Fourth edition, Vol. II, p. 210.

36 *Are We to Have a United Medical Profession?*

This pathogenetic effect of opium may be precisely the same in a person diseased as in a person well, and to induce this effect in a patient is to poison him to some degree. I believe it is sometimes useful to cautiously and within bounds thus poison a patient with opium or morphine; but when the immediate object of our practice is to poison a patient to some degree, we should be exceedingly careful not to harm him. Other rational practices with opium commend themselves to me.

17. *What relation do you think that homeopathy as practiced at present bears to the so-called old school practice?*

My belief is that *similia similibus curantur* is a law of nature, and I answer this question from my standpoint in that belief. The practice of homeopathy, at any given time, is the use of medicine under guidance of *similia*, and at no time can that practice (unless incidentally) bear any relation whatever to any practice with medicines to which *similia* has not been the guide.

One may frequently be asked, *don't you think that the two schools are coming nearer together?* That to-day homeopaths are, more than formerly, availing themselves of various practices which are distinctly *not homeopathy*, and that the so-called old school has discontinued many harmful practices, and is in some instances *empirically* using medicines which are somewhat homeopathic is true: but these resemblances are all on the surface of things, whereas the essential of homeopathy (*similia* as law) is not on the surface, and it does not occur to me what could be adduced as evidence that the so-called old school as a body

is in the least disposed even to admit that perhaps *similia's* claim is just*.

Each of you may have heard from one or another so-called old school physician an expression of the opinion that there should be no distinct bodies in medicine—that all properly qualified physicians should belong to one body and fraternize in societies. Such expressions on the part of individuals are, I think, interesting and significant; but there can be no live question regarding fellowship of homeopaths and the so-called old school in a common society, so long as the so-called old school as a body is unwilling to fraternize with any man until he shall have pledged himself with his signature or by word of mouth that he does not believe in or intend to practice homeopathy, or shall have pledged something to that effect. Membership in a society cannot make or unmake a homeopathist, and I take it that no kind of co-operation between the two bodies can obtain without provision for absolute independence or, at least, freedom in all thought and all work relating to the principle *similia*. If I correctly understand the existing condition of things, the so-called old school as a body, having constituted itself an agent exceedingly powerful for the crushing-out of homeopathy and for obstruction to its progress, is still exerting itself to accomplish this work through legislation, through the press and through the influence of its individual members. I raise no question but that the so-called old school is proceeding in this matter in the belief that the measures it adopts are calculated to subserve the best interests of mankind and of the medical profession. It may be presumed that the so-

*This was written in 1890.

called old school as a body will make the fact known, if it shall at any time have come to pass that they want the co-operation of homeopaths in matters aside from homeopathy.

If you are in the habit of thinking that homeopaths are exclusive, and that the so-called old school is not, please consider whether your views upon this point should be revised, or perhaps abandoned and replaced by different views.

From some of your questions I infer that perhaps each of you might say what one or another of you has said to me regarding himself, viz: that he has not given any particular attention to the subject of homeopathy, and feels that really he does not know much about it. If you do not know much about homeopathy, the fact is not surprising; nor would I allude to it in any reproachful way; your thought and studies have lain in other directions, and I am exceedingly glad that you have in the subject of homeopathy an interest such as the circumstances of my presence with you this evening imply. The bearing of this paragraph is upon what may still be a question in your minds, viz: whether, in the present state of opinion regarding homeopathy, it is wise to exact as prerequisite to admission into societies intended not only for physicians of age and experience, but also for physicians who have just received their degrees, any pledge or promise which could embarrass one in determining his attitude toward homeopathy.

I do not know that in the whole controversy over homeopathy there has developed anything more remarkable than the proposition that homeopaths should retain the idea *homeopathy*, and annihilate the word *homeopathist*. In

an address before the Rhode Island Medical Society, in 1886, upon "The past, present and future Treatment of Homeopathy, Eclecticism, and Kindred Delusions which may hereafter arise in the Medical Profession," Dr. Henry I. Bowditch said: "Let members of either of these sects 'join our State Societies, provided they prove to the State 'Examiners or Censors that they have studied medicine a 'proper length of time and are able to pass the examination 'required of all applicants for admission, and provided 'moreover they agree to cease to call themselves by any 'peculiar name because they desire to enroll themselves as 'members of our time-honored profession.'" I cannot think that the least improvement upon the present state of affairs would be effected by an agreement among homeopathsists not to call themselves homeopathsists: indeed, with all due respect to those who think otherwise, I think that the proposition is absurd. The words *homeopathy*, *homeopathic*, *homeopathsist* (or *homeopath*) occur, as matter of course, in Dr. Bowditch's address, in your questions to me, and in my answers to you: to abolish any one of those words, were such a thing possible, would, to say the least, seriously embarrass both homeopathsists and the so-called old school in advocating their respective views regarding the claim of *similia*. To me it seems probable that the name *homeopathsist* will distinguish those who believe in *similia* from those who do not, until a time when *similia* is generally recognized, and when physicians are, as matter of course, homeopathsists: after such time the word *homeopathsist* would perhaps be superfluous.

How much does the so-called old school practice of today resemble homeopathy? I do not propose telling you

that the so-called old school practitioners sometimes with ipecac relieve a patient of vomiting, and sometimes with jaborandi relieve him of sweating, or to search out various instances in which they use medicines which are more or less homeopathic. What I do propose telling you is that, so far as I am aware, such practices in the so-called old school are purely and simply *empirical* and in no recognition whatever of *similia*. Farquharson says of ipecacuanha: "A most remarkable fact in the action of this drug is its power, when given in small doses, of checking *vomiting*. * * * At present this must be looked upon as one of the enigmas of therapeutics."* Would it not be reasonable to let *similia* play some part in the solution of this particular enigma? I could easily construct from writings upon therapy by Brunton, Ringer, Bartholow and various representative men in the so-called old school many an enigma to which *similia* would seem a more or less satisfactory answer; but I do not know from what man in the so-called old school I could cite an intimation that perhaps *similia* is what we homeopaths believe it to be, viz: the law of a cure which transcends the possibilities of rational medicine. You may frequently hear that there are various laws of cure—that *similia* is one of them, and that this has been recognized in the so-called old school since the time of Hippocrates. What practical effect is there in the so-called old school of any belief in *similia* as a law of cure? A law is of no use in so far as it is merely recognized *a posteriori*; knowledge of a law becomes useful when that law is recog-

*Farquharson's Therapeutics and Materia Medica, second American edition, adapted to the U. S. Pharmacopoeia by F. Woodbury, M. D., p. 291.

nized as a *a priori* ground for action. Does any one of you know a so-called old school physician who ever said to himself: *in my treatment of this patient I shall be guided by SIMILIA, one of the laws of cure?* My belief is that in the so-called old school as a body there is no practical, useful recognition whatever of *similia* as a law of cure.

You may hear a so-called old school physician say that he is willing to use a homeopathic medicine on sufficient evidence that it is useful. To base practice simply on evidence is empiricism. If in a given case I prescribe a medicine, simply because Hahnemann or Boenninghausen or some one else attributed a cure to the same medicine in like circumstances, the medicine may be more or less homeopathic to disease as manifested in my patient, but my selection of it is purely empirical. The ideal practice of homeopathy involves a study of each case by itself, and in each case a prescription under guidance of *similia* as law. In a practice of simply following precedents there can be no intelligent progress: in practice under guidance of *similia* there may be endless progress.

I have quoted Farquharson to the effect that the power of ipecac, when given in small doses, of "checking vomiting" must at present be looked upon as one of the enigmas of therapeutics. It is intrinsic in empiricism to regard benefit derived from any drug in any circumstances, as an enigma. When one of these enigmas is correctly solved, future practice based upon the facts which correctly explain the enigma is not empiricism, for it is based upon a *a priori* reason. To correctly explain a useful practice empirically hit upon may be of use as an inductive generalization upon which other practices may be based, but as regards the

